TRANSMITTAL SHEET FOR NOTICE OF INTENDED ACTION

ControlDepartment or Agency <u>Secretary of State</u>	
Rule No. 820-2-230	
Rule Title: Report of Voter's Change of Residence of	or Death Form.
X	opt by Reference
Would the absence of the proposed rule significantly harm or endanger the public health, welfare, or safety?	Yes
Is there a reasonable relationship between the state's police power and the protection of the public health, safety, or welfare?	Yes
Is there another, less restrictive method of regulation available that could adequately protect the public?	
the public?	No
Does the proposed rule have the effect of directly or indirectly increasing the costs of any goods or services involved and, if so, to what degree?	No
Is the increase in cost, if any, more harmful to the public than the harm that might result from the absence of the proposed rule?	No
Are all facets of the rulemaking process designed solely for the purpose of, and so they have, as their primary effect, the protection of the public?	Yes
*****************	******
Does the proposed rule have an economic impact?	No
If the proposed rule has an economic impact, the propose required to be accompanied by a fiscal note prepared in subsection (f) of Section 41-22-23, Code of Alabama 1975	accordance with
***************	******
Certification of Authorized Official	
I certify that the attached proposed rule has been propocompliance with the requirements of Chapter 22, Title 41 1975, and that it conforms to all applicable filing requirements and applicable filing requirements.	, Code of Alabama
Signature of certifying officer \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	DEOID & EU ED
Date October 21, 2015	REC'D & FILED
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OCT 2 1 2015

Office of the Secretary of State Administrative Division

NOTICE OF INTENDED ACTION

AGENCY NAME:

Secretary of State.

RULE NO. & TITLE:

820-2-2-.30 Report of Voter's Change of

Residence or Death Form.

INTENDED ACTION:

New Rule.

SUBSTANCE OF PROPOSED ACTION: This proposed rule is necessary to facilitate the continuous maintenance of the computerized statewide voter registration list by providing a form to report that a voter in the statewide voter file is deceased or has become a nonresident of the precinct in which he or she is registered to vote.

TIME, PLACE, MANNER OF PRESENTING VIEWS:

Views may be presented orally or in writing and should be addressed to Jean Brown, Office of the Secretary of State, P.O. Box 5616, Montgomery, Alabama 36103; 334-242-7202.

FINAL DATE FOR COMMENT AND COMPLETION OF NOTICE:

December 4, 2015.

CONTACT PERSON AT AGENCY:

Jean Brown, Office of the Secretary of State, State Capitol, 600 Dexter Avenue, Suite S-205, Montgomery, Alabama 36104; 334-242-7202.

(Signature of officer authorized to produlgate and adopt rules or his or her deputy)

APA-2 07/04

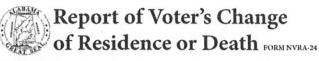
NEW

STATE OF ALABAMA OFFICE OF THE SECRETARY OF STATE ELECTIONS DIVISION ADMINISTRATIVE CODE

820-2-2-.30

Report of Voter's Change of Residence or Death Form.

The following form is for use by a family member of a voter, the inspector of a voter's election precinct, judge of probate, sheriff, or clerk of the circuit court to report that a voter in the statewide voter file is deceased or has become a nonresident of the precinct in which he or she is registered to vote. Further, the form is for use by the inspector of the voter's election precinct, judge of probate, sheriff, or clerk of the circuit court to provide a statement as to the source and nature of the information supporting the report that the voter is deceased or has become a nonresident of the precinct in which he or she is registered to vote.



FOR	REGIST	RARS USE ONLY	1	

Purpose

This form is intended to provide notification to the Board of Registrars that a registered voter is no longer a resident of the precinct in which he or she is registered to vote due to the voter's change of residence or death (§17-4-6.1, Code of Alabama, 1975).

Who May Use this Form

This form is for use by a family member of the voter, the inspector of the voter's election precinct, or the Judge of Probate, Sheriff, or Clerk of the Circuit Court of the county in which the voter is registered to vote.

Instructions

Complete this form as thoroughly as possible. Requested information will be used to ensure that the Board of Registrars can identify the correct voter. Sign the form and then submit it to the Board of Registrars of the county in which the voter is registered.

Information about Voter

Reason for complet	ing this form: Voter has moved	outside of	precinct Dea	ath of Voter		
ast Name	First Name		Middle Name	Suffix		
Date of Birth	Date of Death (if deceased)	Gender Male Female	Last 4 Digits of SSN	Driver License or ID No.		
oter's Address on '	Voter Registration Record	City	State	ZIP Code		
/oter's Address (if v	voter has moved outside of precinct)	City	State	ZIP Code		
Address	State 7	in Codo				
City	State Z	ip Code				
Relationship to Voter (if family member)			Title (if public official)			
Signature		Date	Date Signed			
THE CIRCUIT C	SPECTOR OF ELECTION PRECIDENCY OURT - Please describe the source a pecome a nonresident of the precinct.					

Authors: Edward Packard, William Sutton.

Statutory Authority: Code of Ala. 1975, \$17-4-6.1.

History: New Rule: Filed October 21, 2015.